## POLICY Surrender of Certificate

Candidates desiring to surrender EMS certificate must:

- C Complete and sign a Surrender of Certificate statement
- Acknowledge that if disciplinary action is actually pending or reasonably imminent, surrender is a "no contest" plea
- C Acknowledge if surrender is because of inability to continue to perform & identify reason for inability

To regain certification, candidates who surrendered certification must:

- c Petition the department, in writing, for approval to reapply for certification
- c Provide evidence of present fitness and that reasons for surrender no longer apply
- Meet the maximum reentry requirements to return to active status: 157.45 (f), if within two years of surrender
- C Meet initial certification requirements if two years or more after surrender



## Texas Department of Health Bureau of Emergency Management Surrender of Certificate

Candidates desiring to surrender an EMS Certificate mu	ast complete and sign below.
I am hereby surrendering my certif ECA, EMT, EMT-I or EMT-P	Ficate which is due to expire on Expiration Date
I understand that in surrendering my certificate, the follow	wing conditions apply:
contest' to the disciplinary action.	reasonably imminent, this statement is considered a plea of 'no CCA, EMT, EMT-I or EMT-P, I must identify the reason to the
To regain EMS certification, the following conditions apply:	
fitness, and that the reasons that led to the surrender of If within two years of surrender date, to regain EMS per EMS rules §157.45 (f).	ion the department, in writing, and provide evidence of present of my certification no longer apply. certification, I must meet the maximum reentry requirements as S certification, I must meet initial certification requirements as
shall not perform any EMS activities regulated under the practice as, attempt to practice as, or to represent mysel	ate by the Bureau of Emergency Management, EMS Division, I be Health and Safety code, Chapter 773, and that to knowingly off as a certified EMS personnel is a Class A misdemeanor at aid or cardiopulmonary resuscitation in the capacity of a lay diffication, but do not desire that status.
Signature	Date
Print Above Name	Social Security #*

\*Disclosure of your SS# is voluntary. We recommend you provide your SS# as it is used to assure that TDH has an accurate identifier not subject to the coincidence of similar names among the large number of persons on whom data is maintained.